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Approved for use through 09/30/2000. OMB 0651-0031

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | | | |
|--|---|------------------------|-------------------|
| | | Application Number | 10/085,854 |
| | | Filing Date | |
| | | First Named Inventor | RONALD DEAN SMITH |
| | | Group Art Unit | |
| | | Examiner Name | |
| Total Number of Pages in This Submission | 2 | Attorney Docket Number | |

ENCLOSURES (check all that apply)

| | | |
|--|---|---|
| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment / Response | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Additional Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Small Entity Statement | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |
| Remarks | | |
| <p>Please find enclosed correction of informalities.</p> <p>1) The claim on a separate sheet. 2) Abstract on a separate sheet.</p> | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------------|---|
| Firm or Individual name | RONALD DEAN SMITH and PATSY ANDERSON SMITH |
| Signature | Ronald Dean Smith Patsy Anderson Smith |
| Date | June 6, 2002 |

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

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| Typed or printed name | Patsy Anderson Smith | Date | 6/6/02 |
| Signature | Patsy Anderson Smith | | |

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Page 1 of 1
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| APPLICATION NUMBER | FILING/RECEIPT DATE | FIRST NAMED APPLICANT | ATTORNEY DOCKET NUMBER |
|--------------------|---------------------|-----------------------|------------------------|
| 10/085,854 | 02/27/2002 | Ronald Dean Smith | |

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CONFIRMATION NO. 1691
FORMALITIES LETTER

Date Mailed: 04/08/2002

NOTICE TO FILE CORRECTED APPLICATION PAPERS

Filing Date Granted

This application has been accorded an Application Number and Filing Date. The application, however, is informal since it does not comply with the regulations for the reason(s) indicated below. Applicant is given **TWO MONTHS** from the date of this Notice within which to correct the informalities indicated below. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

The required item(s) identified below must be timely submitted to avoid abandonment:

- The Claim(s) commencing on a separate sheet (37 CFR 1.75(h)).
- Abstract must be on a separate sheet.

*A copy of this notice **MUST** be returned with the reply.*

SC:lm

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